

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         | T-G      |        | 3/30     |
| O.I.P.E. CLASSIFIER       |          |        |          |
| FORMALITY REVIEW          | TU       | 850    | 05 18 PM |
| RESPONSE FORMALITY REVIEW |          |        |          |

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

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| Claim          | Date    |
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| Final Original |         |
| 1              | 8-21-41 |
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| Claim          | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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